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THIRD REQUEST

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NAME: CUSTOMER CORRECTIONS	CLIENT/MATTER NO: 6169-203
PHONE:	TOTAL PAGES: 04
FIRM/COMPANY NAME: USPTO	CITY, STATE:

SENDER'S NAME: ALAINE ALLISON

In re: Applicant: Hand, et al.
Dated Filed: 05/25/01

Serial No.: 09/865,393
Our Docket No.: 6169-203

On 08/27/01, we requested the following correction be made. We are still waiting on a corrected Official Filing Receipt. **PLEASE MAKE THE FOLLOWING CHANGES:**

Applicant(s): Change "Ft. Worth" to -- Trophy Club--

Assignment for Published Patent Application:

Change "New Orchard Road, Armonk, NY" to -- International Business
Machines Corporation, Armonk, NY --

Please forward the corrected Official Filing Receipt as soon as possible to this office.

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PLEASE DELIVER THE ACCOMPANYING TELECOPIED MATERIAL TO:	TRANSMITTAL DATE: Aug 27, 2001
NAME: Customer Corrections	CLIENT/MATTER NO: 6169-203
PHONE:	TOTAL PAGES: 4
FIRM/COMPANY NAME: US Patent And Trademark Office	CITY, STATE: Washington, DC

SENDER'S NAME: Alaine Allison**Comments from Sender:**

RE: Applicant: Hand, et al.
Date Filed: 05/25/01

Serial No.: 09/865,393
Our Ref.: 6169-203

In furtherance to our fax request dated 08/07/01, attached please find a copy of the Official Filing Receipt. Please correct the filing receipt to reflect the following:

Applicant(s): "Ft. Worth" should be --Trophy Club--

Assignment for Published Patent Application: "New Orchard Road, Armonk, NY" should be -- International Business Machines Corporation, Armonk, NY--

Please forward a corrected filing receipt to this office at your earliest convenience. Thank you for your assistance in this matter.

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/865,393	05/25/2001	2171	942	6169-203	4	24	5

CONFIRMATION NO. 4209

FILING RECEIPT



OC000000006352683

Gregory A. Nelson
Akerman Senterfitt
P.O. Box 3188
222 Lakeview Avenue, Fourth Floor
West Palm Beach, FL 33402-3188

Date Mailed: 07/27/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Trophy Club
Leonard S. Hand, (Ft. Worth) TX;
Jeffery R. Washburn, Roanoke, TX;

Assignment For ~~Published~~ Patent Application

International Business Machines Corporation
New Orchard Road, Armonk, NY;

Domestic Priority data as claimed by applicant

Foreign Applications

If Required, Foreign Filing License Granted 07/26/2001

Projected Publication Date: 11/28/2002

Non-Publication Request: No

Early Publication Request: No

Title

Method and apparatus for replaying and visualizing post-performance metrics for a complex heterogeneous data space



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Bib Data Sheet

CONFIRMATION NO. 4209

SERIAL NUMBER 09/865,393	FILING DATE 05/25/2001 RULE	CLASS 707	GROUP ART UNIT 2177	ATTORNEY DOCKET NO. 6169-203	
APPLICANTS Leonard S. Hand, Trophy Club, TX; Jeffery R. Washburn, Roanoke, TX; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 07/26/2001					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY TX	SHEETS DRAWING 4	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 5
ADDRESS Gregory A. Nelson Akerman Senterfitt P.O. Box 3188 222 Lakeview Avenue, Fourth Floor West Palm Beach ,FL 33402-3188					
TITLE Method and apparatus for replaying and visualizing post-performance metrics for a complex heterogeneous data space					
FILING FEE RECEIVED 942	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		